

# FORMS FOR BID

# FOR CONSTRUCTION ON STATE HIGHWAY IN GLENN AND SACRAMENTO COUNTIES AT VARIOUS LOCATIONS

In District 03 On Route 16, 32, 50, 80, 160 Under

Notice to Bidders and Special Provisions dated April 20, 2015

Standard Specifications dated 2010

Project plans approved January 20, 2015

Standard Plans dated 2010

To be submitted conjointly with
Electronic *Bid* book dated April 20, 2015
Identified by
Contract No. 03-4F2704
03-Gle,Sac-16, 32, 50, 80, 160-VAR
Project ID 0314000092

Federal-Aid Project ACHSNHG-000C(393)

#### STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION

### **DBE - COMMITMENT**

DES-OE-0102.10D (REV 12/2014)

ADA Notice

CONTRACT NO:						
BID AMOUNT:						
\$						
BID OPENING DATE:						
BIDDER'S NAME:						
DBE GOAL FROM CONTR	ACT %:					
DBE PRIME CONTRACTO	R CERTIFICATION <sup>1</sup> :	TOTAL NUMBER OF A	LL SUBCONTRACTS (DBE &	NON-DBE)	TOTAL VALUE OF ALL SUBCONTRA	CTS (DBE & NON-DBE)
BID ITEM NO.	SERVICES TO BE S	ND DESCRIPTION OF RUBCONTRACTED OR D BE PROVIDED <sup>2</sup>	WORK CATEGORY CODES <sup>3</sup>	opened.	NAME OF DBEs st be certified on the date bids are include Caltrans' certification no., DBE s, and phone number. Show 2nd and lower tier subcontractors)	AMOUNT (\$)
Show all DBE firms being each DBE shown stating shown for the specific an	that it will be participat		written confirmation from erform the specific work		Total Claimed Participation	<u>\$</u>
The names of the 1st tier			be consistent with the			%
Subcontractor List (Pub (	ctor must enter its certi	fication number and sh	ow all work to be		er acknowledges that it is comm own on this form to meet the cor	itted to use the
<sup>2</sup> If 100% of an item is not the item to be performed		nished by the DBE, de	scribe the exact portion of			
<sup>3</sup> Use Work Category Cod	des from the California	Unified Certification Pr	ogram database.	Sig	gnature of Bidder	
				Da	te (A	rea Code) Tel. No.
				Pe	rson to Contact (Ple	ease Type or Print)

For individuals with sensory disabilities, this document is available in alternate formats. For information, call (916) 445-1233, TTY 711, or write to Records and Forms Management, 1120 N Street, MS-89, Sacramento, CA 95814.

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DRE	GOOD	<b>EVITH</b>	<b>FFFORTS</b>	<b>DOCUMENTATION</b>
	GOOD	FALLE	EFFURIS	DOCUMENTATION

DES-OE-0102.11A (REV 12/2014)

Bidder's Name:	
Contract No.: _	

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List items of work the Bidder made available to DBE firms. Identify items of work the Bidder might otherwise perform with its own forces, items that have been broken down into economically feasible units to facilitate DBE participation, and items for which the Bidder has established flexible time frames for performance and delivery schedules in a manner that encourages and facilitates DBE participation. For each item listed, show the dollar value and percentage of the total contract. The Bidder must demonstrate that sufficient work to meet the goal was made available to DBE firms.

Item of Work Offered, Services Offered, or Materials Supplied	Perfori	Normally ms Item s/No	Facilitate I	en Down to Participation s/No	for Performan Scho	xible Timeframes ce and Delivery edules s/No	Amount (\$)	Percentage of Total Bid
	YES	Пио	YES	Пио	YES	□ NO		
	YES	□ NO	YES	□ NO	YES	□ NO		
	YES	Пио	YES	Пио	YES	NO		
	YES	NO	YES	NO	YES	□ NO		
	YES	NO	YES	NO	YES	NO		
	YES	□ NO	YES	NO	YES	□ NO		
	YES	NO	YES	NO	YES	□ NO		
	YES	□NO	YES	□ NO	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	NO	YES	□ NO		
	YES	Пио	YES	NO	YES	NO		
	YES	Пио	YES	NO	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	NO	YES	□ NO		
	YES	NO	YES	NO	YES	□ NO		
	YES	NO	YES	Пио	YES	NO		
	YES	□ио	YES	Пио	YES	□ NO		
	YES	NO	YES	Пио	YES	□ NO		

STATE OF CA	LIFORNIA • DEP/	ARTMENT OF 1	TRANSPORTATION

## **DBE GOOD FAITH EFFORTS DOCUMENTATION**

DES-OE-0102.11A (REV 12/2014)

Bidder's Name:	
Contract No.: _	

DES-OE-0102.11A (F	REV 12/2014)							Page 2 of 3
						clude the items of work offered a copies of solicitations. e-mail me		
Name of DB	E Solicited	Date of I	Date of Initial Solicitation		ltems of	Work Offered	Follow Up Me	thods and Dates
	ided quotes, the pri	ce quote for e	each firm, and the p	rice dif	ference for each DBE	pecific to the items of work being if the selected firm is not a DBE. act.		
Items of Work	Provided P Specifications for W Yes/No	Vork Offered	Name of Selec Firm	ted	DBE or Non-DBE	Name of Rejected Firm	Quote (\$)	Price Difference (\$)
	YES [	Пио						
	YES [	Ои						
	YES [	Ои						
	YES [	Ои						
	YES [	Ои						
	YES [	Ои						
	YES [	Ои						
	YES [	Пио						
	YES [	Пио						
If the firm selected for the						ıd attach names, addresses, and	phone numbers for the	firms listed above.

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DBE	GOOD	FAITH	<b>EFFORTS</b>	<b>DOCUMEN</b>	TATION
	CCCD	. ~		DOCUMENT	

Bidder's Name:	
Contract No.:	

4. Describe the Bidder's outreach efforts to identify and solicit the interest of all certified DBEs that have the capability to perform the work of the Contract. Provide copies of supporting documents.								
Description of Outreach	Dates	Location (if applicable)	Results					
	le interested DBEs with adequate information a assisted, the type of information provided, and							
Describe the Bidder's efforts made to assist dates. Provide copies of supporting documents	interested DBEs in obtaining bonding, lines of s.	credit, or insurance. Identify the DBEs assisted	d, the type of assistance offered, and the					
equipment the DBE purchases or leases from documents. List efforts made to assist interesti	interested DBEs in obtaining necessary equipt the prime contractor or its affiliate. Identify the ed DBEs in obtaining bonding, lines of credit, in boontractor purchases or leases from the prime	DBEs assisted, the type of assistance offered, nsurance, necessary equipment, supplies, mate	and the dates. Provide copies of supporting erials, or related assistance or services,					
List the names of agencies and the dates or	n which they were contacted to provide assista	nce in contacting, recruiting, and using DBE fire	ms. If the agencies were contacted in writing.					
provide copies of supporting documents.	, ,	<i>3</i> 3, 3	<u> </u>					
9. Include additional data to support a demons	tration of good faith efforts.							
NOTE: USE ADDITIONAL SHEETS OF PAPE	R IF NECESSARY.							

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